

PROJECT EARN INCOME IMPROVEMENT AND ADVANCEMENT PLAN

PARTICIPANT NAME: _____

CASE NUMBER: _____

PROJECT EARN COACH: _____ TODAY'S DATE: _____

In order for us to assist you in meeting your advancement goals and provide customized services, please complete the following questions:

1. Please list your current job(s):

Start date:	Employer:	Job Title:
Hours per week:	Wage per hour:	Health benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No
Work address:		
Supervisor:		Work phone:
Job duties:		

Start date:	Employer:	Job Title:
Hours per week:	Wage per hour:	Health benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No
Work address:		
Supervisor:		Work phone:
Job duties:		

2. What do you feel might prevent you from improving your present employment situation?

- | | | |
|--|---|---|
| <input type="checkbox"/> Lack of promotional opportunities | <input type="checkbox"/> Resume/Interview | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Lack of Skills/Training | <input type="checkbox"/> English Language Skills | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Lack of Education | <input type="checkbox"/> Health Issues (Physical/Mental) | <input type="checkbox"/> Criminal Record |
| <input type="checkbox"/> Finances | <input type="checkbox"/> Family Issues (Health/Caregiver) | <input type="checkbox"/> Interview Clothing |
| <input type="checkbox"/> Not Familiar with Job Market | <input type="checkbox"/> Childcare | |

Other: _____

3. Education/Training completed: _____

4. Financial supports – based on income calculator, participant potentially eligible to:

- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Advantage | <input type="checkbox"/> Medi-Cal | <input type="checkbox"/> Child care subsidy |
| <input type="checkbox"/> EITC support | <input type="checkbox"/> Child tax credit | <input type="checkbox"/> Other |

10/20/15

This Income Improvement and Advancement Plan is a record of what you and your Project EARN Coach have agreed. It provides a record of the kind of work and pay you want to progress to, what you will need to do achieve it and what you and your coach can do to get you there. It is also a record what you do to receive other income to support your advancement efforts.

Advancement Goals (include areas of work interest): ___ Find a job in field of fascination in _____ ___ Earn a pay increase to: _____ ___ Increase hours (from ___ hrs. a wk. to ___ hrs. wk.) ___ Earn a promotion to: _____ ___ Be awarded benefits (medical, dental, vacation, etc) ___ Find a job at a different company	Income Improvement Goals: Receive: ___ Assistance with food costs ___ Health insurance for self/family ___ Subsidized childcare ___ Tax credits (EITC/Child Tax Credit)
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ACTIVITIES TOWARD GOALS

[illegible]